

Technology Advances in EMR Systems



AT A GLANCE

Nehalem Valley Care Center replaced an antiquated EMR with PointClickCare (PCC) to reduce documentation burden, errors, and charting-related stress, while creating more time for resident care. The implementation added Nursing Advantage modules, trained super users, and iteratively tuned workflows; go-live was delayed and billing issues surfaced but were resolved during rollout. By project completion, nurses reported substantially easier charting, fewer errors, and improved day-to-day efficiency with the new system.

CHALLENGES

Staff reported redundant documentation, complex navigation, frequent errors, and agency staff avoidance, contributing to frustration and time pressure. Staff sought easier charting, fewer errors, and less re-work.

SOLUTIONS

This project proposed to transition staff to a more widely used and user-friendly EMR which included system replacement, structured staff training, standardized documentation tools, and improved navigation to reduce redundant work and frustration.



Virtual PCC support



Nurse Advantage Software



Quick charting cards



Staff Training & New Staff Onboarding

We learned quickly that frontline workflows have to guide which [EMR] modules are selected.

Key Outcomes

EMR transition improved efficiency and morale: 77% easier charting, 61.5% fewer errors, 54.8% lower charting stress; missed-charting ~4→0.5 pages/day; agency staff more willing to cover shifts.



73.4%

Increase in nurse satisfaction with charting



177%

Decrease in documentation errors

LESSONS LEARNED

Implementation revealed misalignment between initial expectations and vendor training capacity; in-person sessions described in planning were not delivered, requiring rapid adaptation to virtual support. Early billing complications highlighted the need to involve third-party billing partners before go-live to avoid duplicate codes and payer-data errors. Staff emphasized that frontline workflows must drive module selection, as initial PCC packages omitted key functions and caused delays and retraining. Leadership noted that early super-user involvement and iterative workflow adjustments were essential for gaining staff confidence and promoting consistent use of the new EMR.

Administrative Process & Professional Practice